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CONFIRMATION NO. 3885

SERIAL NUMBER 10/828,548	FILING DATE 04/19/2004 RULE	CLASS 424	GROUP ART UNIT 1649	ATTORNEY DOCKET NO. 15270J-004747US
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APPLICANTS

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DK - 1/6/06

** CONTINUING DATA *****

This application is a CON of 09/322,289 05/28/1999
 which is a CIP of 09/201,430 11/30/1998 PAT 6,787,523
 which claims benefit of 60/080,970 04/07/1998
 and claims benefit of 60/067,740 12/02/1997

DK 1/6/06

** FOREIGN APPLICATIONS *****

None

IF REQUIRED, FOREIGN FILING LICENSE GRANTED

** 06/02/2004

Foreign Priority claimed	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no	STATE OR COUNTRY	SHEETS	TOTAL CLAIMS	INDEPENDENT CLAIMS
35 USC 119 (a-d) conditions met	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance	CA	16	118	18
Verified and Acknowledged Examiner's Signature	Initials				

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TITLE

Prevention and treatment of amyloidogenic disease

FILING FEE	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time)
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No. _____ for following:

1.18 Fees (Issue)

Other _____

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